# F1900003786

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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B KINSEY



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2019

JANI CRUZ 3038 N FRY RD #48 KATY, TX 77449

SUBJECT: SAUNDERS LOGISTICS INC

Ref. Number: W19000075473

We have received your document for SAUNDERS LOGISTICS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 219A00016814

District of Constant and DOV COOT Mills II and the

### COVER LETTER

TO:

	tion Section of Corporations	
SUBJECT:	Saunders Logistics Inc	
_	Name of corporation	- must include suffix
Dear Sir or Mad	am:	
"Certificate of E	pplication by Foreign Corporation for existence." or "Certificate of Good Stard foreign corporation to transact business."	Authorization to Transact Business in Florida," adding and check are submitted to register the ess in Florida.
Please return all	correspondence concerning this matter	to the following:
	JANI CF	RUZ
	Name of	Person
	Saunders I	ogistics Inc
<del>-</del>	Firm/Com	pany
	3038 N Fry Rd	# 48
	Addre	ess
	KATY, TX,	77449
	City/State a	nd Zip code
	SAUNDERSLOGISTICS	
	t-mail address: (to be used t	for future annual report notification)
For further infor	mation concerning this matter, please of	rall:
JANI CR	RUZ at ( 832	) 266-8744
Name o	f Person Area Cod	e Daytime Telephone Number
		· 4
Registra Division Clifton E 2661 Ex	T/COURIER ADDRESS: tion Section of Corporations Building ecutive Center Circle see, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a che	eck for the following amount:	
☐ \$70.00 Filing	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Sertified Copy Certified Copy Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

, Saunders Lo	ogistics, Inc				
(Enter name of o	orporation; must include "INCORPO	ORATED," "C	OMPANY," "CORPORATION	•	·
1110., CO., C	orp." "Inc." "Co." or "Corp.")				
Saunders k	ogistics of Usa Inc				
	able in Florida, enter alternate corpo	rule name ado	and for the second second	<del></del>	
		rate name adoj	ned for the purpose of transacting	, business in F	lorida)
TEX		3	47-1479583		
	y under the law of which it is incorp	orated)	(FEI number, if app	licable)	
July 3	30 , 2014	5			
(Date	(Date of incorporation)		(Date of duration, if other t	han perpetual	<del></del>
				F F	,
	(Date first transpoted	husiness in Pla	rida, if prior to registration)		<del></del>
	(SEE SECTIONS 607.150	1 & 607.1502,	F.S., to determine penalty liability	y)	
			pe Coral , FL, 33993		
		(Principal o	ffice address)		
	2037 NW	luanita PL Cs	ape Coral , FL, 33993		
			dress, if different)		
Name and stree	t address of Florida registered ag	gent: (P.O. B	ox <u>NOT</u> acceptable)		2019 AUG
fice Address:	2037 NW Juanita Pl				)G   5
	Cape Coral		-	-	
	(City)		. Florida <u>33993</u> (Zip code)		PH 4: 2
			(Zip code)		<del></del>
Registered age	nt's acceptance:			•	27
ving been nam	ed as registered agent and to account to	cept service o	f process for the above stated	corporation	at the pla
M m m m m m m m	apparanon, i nereny acceptine	annointment	AS FRUISIPPOR MOUNT and area.		2
mer agree in ti	imply with the provisions of all similiar with and accept the oblig	SIMULAS PAINI	ve to the proper and commiss.	: performan	ce of my
,	min and accept the oblig	gations of my	position as registered agent.		
		CW/I			
		XV//www	/		
		400		<del></del>	
	(Re	egistered agent	signature)		
		J	V		

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRE	CTORS			
Chairman:	JANI CRUZ			
Address: _	2037 NW Juanita Pl			
_	Cape Coral , FL , 33993			
Vice Chairn	nan:			
				-
Director: _			-	
_				
Director: _				
				-
-				
B. OFFIC	ERS			
	JANI CRUZ			
Address:	2037 NW Juanita PI		·	
	Cape Coral , FL , 33993	Ξ,	9019	
Vice Preside	nt:		aug	3 1
		-	ū	- <del> </del>
_			PH	3-1-20 - 3-1 - 3-47
Secretary: _		T	<del></del>	
		:	7	
\ddress:				
SOTE: If	necessary, you may attach an addendum to the application listing additional officers ar	ıd/or dire	ctors.	
2	- Jan			
re true and	Signature of Director of Officer or director signing this document (and who is listed in number 11 above) affirms that that he or she is aware that false information submitted in a document to the Department effections as provided for in s.817.155, F.S.	he facts : ent of Sta	stated h	erein titutes
3	JANI CRUZ President			
	(Typed or printed name and capacity of person signing application)			

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jose A. Esparza Deputy Secretary of State

### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Saunders Logistics, Inc (file number 802035443), a Domestic Professional Corporation, was filed in this office on July 29, 2014.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: July 30, 2014

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 15, 2019.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Jose A. Esparza Deputy Secretary of State

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Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709

TID: 10264

Dial: 7-1-1 for Relay Services Document: 906966200002